



County of Los Angeles
CHIEF ADMINISTRATIVE OFFICE

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DAVID E. JANSSEN
Chief Administrative Officer

June 14, 2004

To: Supervisor Don Knabe, Chairman
Supervisor Gloria Molina
Supervisor Yvonne B. Burke
Supervisor Zev Yaroslavsky
Supervisor Michael D. Antonovich

From: David E. Janssen
Chief Administrative Officer

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**REPORT ON MEDICAL RECORDS CODER CLASSES AND COMPENSATION
REVIEW, TRAINING PROGRAMS AND TEMPORARY SERVICES AGREEMENTS**

At your meeting of February 24, 2004, on motion by Supervisor Yaroslavsky, your Board instructed my office, County Counsel, and the Directors of Health Services and Personnel to perform a study of the County's medical records coder classes, provide compensation recommendations for those classes, and analyze the adequacy of the medical records coder training program in training permanent County staff to assume the range and breadth of medical records coding and abstracting required at the County's medical facilities.

Further, your Board instructed the Director of Health Services, in consultation with my office and County Counsel, to prepare and submit to the Board a Request for Proposals (RFP) for Medical Records Coding and Abstracting Services and a timeline for the RFP process, including a recommendation and justification for further extensions of the current contracts.

Classification Study

There are currently three non-supervisory County classes in the medical record coder series: Medical Record Technician I, Medical Records Coder, and Medical Record Technician II. In concept, these classes perform essentially the same basic duties involved in coding and auditing patient medical records, but they vary based on level of experience, ability to handle more complex cases, and level of supervision needed.

To assess the current County class specifications and salary ranges for medical record coder classes and their relationships to the labor market, staff from my office and the Departments of Human Resources (DHR) and Health Services (DHS) reviewed the comprehensive Medical Records Classification Study conducted by DHS. In addition, the staff met with several Medical Record Directors at DHS facilities, as subject matter experts, in order to obtain an understanding of the necessary training, duties, responsibilities, work flow, certifications and the practical differences between the Medical Record Technician I and II classes and the Medical Records Coder class.

While there are some minor operational differences between the various facilities, the work performed by the Medical Records Coders and Medical Record Technician II's generally is the same. Both classes organize and evaluate a patient's health record including, the patient's symptoms, medical history, examination and lab test results, diagnoses and treatment plans for completeness and accuracy. They ensure medical charts are complete, all forms are properly completed and necessary information has been entered in the computer system.

Both classes assign appropriate diagnostic and/or procedural codes for each patient, using standardized coding systems geared to either inpatient or ambulatory care (outpatient) settings. They regularly communicate and follow-up with physicians and other healthcare professionals to clarify diagnoses, update data and to obtain missing or additional information.

They also audit medical records for completeness, accuracy, consistency, and compliance with hospital and regulatory requirements to ensure the department receives the appropriate level/maximum amount of reimbursement from Medicare and/or other insurance programs. Both the Medical Record Technician II's and some Medical Record Coders abstract patient data to respond to surveys, or for use in research studies.

Most of the DHS staff involved with medical records coding are in the Medical Records Coder class, ranging from employees who have just completed training to others with several years of experience. Those with little or no experience receive close supervision and are assigned cases that tend to be episodic (outpatient; ambulatory care patients) involving a single or standard procedures. Those with several years of coding experience receive more general supervision and generally are assigned to code inpatient (hospital) cases involving longer hospital stays, complex diagnoses, surgical procedures, multiple medical and laboratory procedures requiring in depth knowledge of treatment regimens, medical and surgical procedures in order to assess the accuracy and completeness of the file.

New Classes and Compensation Review

Based on information reviewed, we understand the Medical Records Technician I class, which is the entry-trainee level, is not being used; instead the present Medical Records Coder class is being used by the department as both an entry (sub-journey), and full journey level classification. The Medical Record Technician II positions are budgeted, but are not utilized as it is our understanding that the Department considers these positions as technically more advanced.

DHR is currently developing classifications which will allow DHS to more effectively allocate its workload needs in the medical records area. The revised classes will update the duties statements to current practice and provide for new minimum requirements that make hiring and allocation clearer and easier. Because the updated classes describe the work in today's terms, they may assist in making salary comparisons in the labor market. DHR will include the study results, as appropriate, in its next classification Board letter, scheduled for consideration by your Board in early to mid-July 2004.

While market pay rates have been identified for those classes in the private sector that most closely resemble the County's current journey level medical records coder positions, CAO staff are now reviewing the more comprehensive descriptions which are being developed by DHR. Therefore, if appropriate, the CAO salary recommendations will be included in the DHR classification Board letter when it is presented for consideration next month.

Should your Board approve the resulting study recommendations at that time, the unions will then have the option of requesting in writing that any new classes be accreted, at which time the County would begin salary negotiations. It is anticipated that the new classes could be implemented by December 31, 2004.

County-Sponsored Training Programs

Beginning in 1999, the County, in conjunction with Service Employees International Union (SEIU) Local 660, sponsored two Medical Records Coder training programs at East Los Angeles Community College for selected permanent County employees. These programs were funded by the County under the joint Labor-Management training fund, administered by DHR, to provide opportunities for and enhance skills of County employees. Approximately 70 students graduated through this training initiative and were hired by DHS as Medical Records Coders.

DHS has continued its partnership with SEIU Local 660 for training programs for DHS employees through the joint Labor-Management Workforce Development Program (WDP), a component of the 1115 Waiver Extension Agreement. Two additional Medical Records Coder training programs have been provided through WDP, which is funded by the State and County. DHS has promoted an additional 54 graduates to Medical Records Coders positions as a result of the WDP training program.

Based on their review of the training program curriculum, on-site work experience of training program graduates, and discussions with facility administrators, DHS indicates that the 18-month medical records coder training program provides the full range of classroom training required by employees entering these positions at DHS medical facilities. However, they also found that the amount of on-site work experience required to achieve journey level competency after completing the training program is greater than they had initially anticipated. They do not believe that changes in the training program should be made on the basis of this finding.

Contract Extensions for Medical Records Coding and Abstracting Services

The Department of Health Services has filed a letter for the June 15, 2004 agenda to extend their existing four overflow medical records coding and abstracting services agreements, on a month to month basis for no more than 12 months. These extensions are necessary for DHS to continue these services while the Department completes its RFP process to select vendors for new agreements and works with CAO and DHR to address recruitment and retention of County employees performing this function.

As instructed, a copy of the RFP will be provided to your Board when it is released, currently scheduled for June 18, 2004. DHS anticipates completing the vendor selection process by late December and concluding contract negotiations and bringing new contracts to your Board for approval in the spring 2005.

If you have questions or need additional information, please contact me, or your staff may contact Sheila Shima of my office at (213) 974-1160 or Sachi Hamai, DHS, at (213) 240-8107.

DEJ:DIL
SAS:bjs

c: Executive Officer, Board of Supervisors
County Counsel
Department of Health Services
Department of Human Resources